

A photograph of a man and a woman sitting on a dark brown couch. The man, on the left, is wearing a blue t-shirt and black shorts, and is looking towards the woman. The woman, on the right, has long blonde hair and is wearing a black top and blue jeans; she is looking back at the man. They are holding hands. In the background, there are framed pictures on a light-colored wall.

DAV[®]

MAGAZINE

NOVEMBER | DECEMBER 2025

'Not just his wife'

A journey from spouse to caregiver
and how DAV helped | Page 16

2026 Mid-Winter Conference

Be a voice for veterans | Feb. 22–25 in Washington, DC

Join the front lines of advocacy for your fellow veterans, and let lawmakers know, face-to-face, that their constituents want promises to veterans kept. The 2026 DAV Mid-Winter Conference includes congressional visits, educational opportunities and National Commander Coleman Neé's presentation for the second session of the 119th Congress. ■

For more information, visit
[dav.org/events/
2026-mid-winter-conference](https://dav.org/events/2026-mid-winter-conference)



From the NATIONAL COMMANDER COLEMAN NEE



The hunger to help

For many, the holiday season is both a time for giving and a time for gathering with family and friends to celebrate the blessings in their lives. For others, it's a time full of stress, sacrifice and compromise, especially for veterans facing food insecurity.

While 1 in 8 U.S. households face this gut-wrenching problem—not having access to sufficient food or food of an adequate quality to meet one's basic needs—that number rises to 1 in 5 for active military and veteran families and is most common for older veterans and those with school-age children, according to a study from the Military Family Advisory Network. On top of that, food insecurity dramatically increases between Thanksgiving and Christmas.

I'm sure many of you would agree that veterans should not have to decide between getting presents for their children and grandchildren or eating something more nutritional than instant noodles for a week.

But I'm not one for doom and gloom, which is why I look at this holiday season as an incredible opportunity to fight a very real problem in our community and make a difference in the lives of the veterans we serve.

To accomplish this, chapters and departments must first increase their focus on food insecurity by viewing it through the lens of a voluntary service project. Members and leaders can easily reach out to community groups to secure spots to serve meals, deliver food or dinners to older veterans who are alone during the holidays, or work the logistics of food pantries. And if our members and leaders do so with the intention of identifying veterans for whom we can file claims or help access the health services and other programs and benefits they've earned for themselves and their families, then we're one step closer to eliminating food insecurity from their lives and bringing them into the DAV family.

Our most precious resource is our time, and I know many of us have our own issues to deal with during the holidays. But I can assure you all that if we give what time we can in this fight—even if only an hour—by securing food or delivering meals, then our organization will have helped keep our promise.

Our brothers- and sisters-in-arms facing food insecurity will instead be able to sit at their tables free of stress. Veteran parents and grandparents will be reminded that their sacrifices for our nation mean they won't have to compromise between putting a smile on a child's face with a gift or filling their stomachs with a healthy and hearty meal. And most importantly, all of us will be able to gather with family and friends to count our blessings this holiday season. ■

CONTENTS



6

Steps toward freedom

Narcolepsy turned a staircase into a daily danger for a 93-year-old Korean and Vietnam war veteran—then DAV stepped in.



16

Cover story

Read about a hidden hero's rewarding but challenging journey and how DAV Caregivers Support made all the difference.

Photos by Precious Depictions Photography/Lorena Diaz



20

Welcome to the club

For women veterans, the experience of menopause can be particularly challenging. Here's what you need to know.

- 1 National Commander Coleman Nee urges all to help veterans facing food insecurity by volunteering this holiday season.
- 5 Learn about the DAV-backed legislation that would expand adaptive transportation equipment for disabled veterans.
- 10 A powerful benefits training platform is expanded to volunteers, ensuring every advocate is equipped to best serve veterans.
- 12 The National Disabled Veterans Golf Clinic uses adaptive sports to bring healing to veterans' lives, but it's volunteer golf buddies who make it possible.
- 24 An Army veteran diagnosed with Stage 4 cancer advocates for more screenings and early detection.
- 28 The 2025 DAV Auxiliary Fall Conference brought representatives from 36 states together to chart the course for supporting veterans.

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From the NATIONAL ADJUTANT BARRY A. JESINOSKI



Exploring every path to healing

As long as humans have engaged in warfare, veterans have struggled with the invisible wounds of battle. While conventional treatments have helped, far too many are still left behind.

However, we're living through what may be a watershed moment in medical research, as science is reopening doors once closed. Psychedelic-assisted therapies have revealed true potential in clinical trials to treat some of the most severe mental health conditions afflicting our community. This glimmer offers hope to veterans contending with not only post-traumatic stress disorder but also depression, traumatic brain injury, anxiety and other conditions in a world where the status quo is failing them.

While the Food and Drug Administration (FDA) has only approved one psychedelic medication—a ketamine nasal spray used to treat depression—other compounds are attracting the attention of veterans and researchers alike.

The FDA has granted breakthrough therapy designation—a regulatory status to fast-track drug development and review—for several psychedelic-based therapies. Psilocybin, the active compound in so-called “magic mushrooms,” received the status for evidence that it treats depression.

The FDA identified a drug similar to LSD as a possible breakthrough. Research has shown that a single dose of LSD, taken under the care of medical professionals in a clinical setting, can ease the burden of anxiety and depression for months.

While MDMA-assisted therapy was identified as a breakthrough treatment for PTSD in 2017, the FDA ultimately decided not to give its full approval. This decision was a disappointment to veterans, our members and supporters of psychedelic treatments, and it highlights the complexity of identifying and investigating these potent compounds in the current regulatory framework.

Still, we believe our nation owes veterans every opportunity to heal, and that means funding and pursuing this science. One such compound that has caught the nation's attention is ibogaine, a psychedelic compound derived from the root bark of the African iboga plant, for its opportunity to heal the effects of traumatic brain injury. Veterans not only stand to benefit from this drug development but also lead the charge. When researchers studied dozens of special operations veterans who used ibogaine, they found the plant-based drug lessened depression and anxiety and improved functioning for those with traumatic brain injuries.

This awakening has led to Texas committing \$50 million to research this emerging treatment, with states like Mississippi following its lead with legislative hearings.

Without veterans and their spouses sharing their stories of struggle and hope, it's hard to see how our nation reached this defining moment.

The journey ahead will take time, but every step in this noble venture brings us closer to new treatments that could save lives and restore hope for countless veterans. ■

Honoring Vietnam veterans

I thoroughly enjoyed the “A generation’s legacy” May/June issue, which featured the trials and victories of these Vietnam veterans, including myself, over the last 50 years. I am a lifetime member of DAV, and when I saw what was in this magazine, I could not put it down. I read it in its entirety. Thank you for your recognition of our service and the things that we have had to deal with after leaving Vietnam and returning to a world that had absolutely no appreciation for our efforts. **Steve Titel, Pine City, Minnesota**

Teaching patriotism to the next generation

Reading your July/August *DAV Magazine*, I was so happy to read “Teaching patriotism to future generations,” about an educator spending time with his students to show them what patriotism means to our amazing veterans. Brad Puckett—thank you! We need to mold our students and be thankful for our freedom. They learn from the best, and you are all it! Yes, Veterans Day is to be honored and not forgotten! Thank you, DAV, for publishing this article. God bless the USA! **Bonnie Braton, Dodge Center, Minnesota**

Save A Warrior

I want to thank DAV for your support of the Save A Warrior program. I recently went through cohort 0290 and experienced a total transformation in my life. Save A Warrior really gets to the root causes of the trauma veterans face in a way that is incredibly empowering. The journey began with 72 intensive hours, and I’m staying with my brothers who supported me on the journey to do the work I need to recover my life; improve relationships; and, in the most positive way, upend the way I look at the world. Members should be proud of the support DAV has given and to

have our mark on the facilities and program that truly save lives. I strongly, strongly encourage veterans who need the help to seek out Save A Warrior and DAV’s services. You might think nothing can help you, but SAW and DAV can change everything for you.

Nick Gonzales, Lewis Center, Ohio

Top-notch training

As a retired national service officer, I can assure you that no organization spends more time and resources training its benefits advocates than DAV. I served veterans from World War I through the Gulf War, a nurse captured on Corregidor who was in the Bataan Death March, and veterans from all of our battlefields. I have trained over 200 service officers across the country. You can bet the service you receive is the very best—from your local representative to the Board of Veterans’ Appeals and the Court of Appeals! **Mark Winn, San Antonio, Texas**

Local chapter welcome

My DAV chapter is a wonderful place. They have breakfast most Saturdays with a large group of veterans who served in all branches and time frames. I have never felt more welcomed since the first time I walked in. They have not asked me for a thing except how I take my coffee. My wife and I are both going to be getting lifetime memberships. I can’t say enough good things about my experience. **Brian Flynn, Mooresboro, North Carolina**

ACES Act

Thank you for supporting the ACES Act, because we were exposed to a lot. Little did I know that the

area where we trained in the DMZ in Korea had been sprayed with Agent Orange when I was there in 1973 and 1974. Also, mechanics used cleaning solvent on a daily basis, which can cause respiratory illnesses. Welding equipment that we used caused health issues along with exposure to asbestos, which leads to lung disease. Thank you, DAV, for fighting for us! **Tommy Rigmaiden, Grand Prairie, Texas**

Editor’s note: *The ACES Act (Public Law 119–32) mandates that the Department of Veterans Affairs partner with the National Academies of Sciences, Engineering and Medicine to study the prevalence and mortality of cancers among veterans who served as aircrew on fixed-wing military aircraft. See what DAV is doing to better serve toxic-exposed veterans at endingthewait.org.*

Recognizing women veterans

We loved hearing the stories of Dr. Mary Edwards Walker and Sarah Emma Edmonds, two trailblazing women who served with courage and defied the limits of their time, on the episode, “Her Service – the Civil War.” Thanks to the DAV Podcast team for highlighting their legacy. Their service reminds us that women veterans have always been part of the fight and part of the story. **Andrea Gayle-Bennett, Lynn, Massachusetts**

Editor’s note: *Listen to this and all DAV Podcast episodes on Spotify, Apple Podcasts, Google Podcasts and Stitcher. Don’t forget to subscribe and leave a review!*

WRITE TO US Please send feedback to DAV Magazine, 860 Dolwick Drive, Erlanger, KY 41018, or via email to feedback@dav.org. We also welcome feedback on our social media pages. We regret we are unable to acknowledge every letter due to the volume received. Letters are subject to editing for clarity, style, accuracy, space and propriety. Letters involving claims are referred to DAV’s Service Department.

Driving independence for disabled veterans



DAV-supported bill would expand adaptive equipment access for disabled veterans, ensuring their safety and mobility

By Kevin C. Miller

For service-disabled veterans, the freedom of independent travel is often hard-won, yet for many, it remains out of reach due to outdated federal regulations.

The Department of Veterans Affairs Automobile Adaptive Equipment (AAE) program, while a vital resource, is currently hindered by a narrow, outdated list of what qualifies as adaptive equipment. This limitation prevents many veterans from getting the specific vehicle modifications they need to travel safely and independently.

The AAE program, originally established for World War II veterans in 1946, has been extended to subsequent generations. However, its legal framework has not kept pace with modern technology.

“Currently, the VA publishes a list of items which it considers ‘adaptive equipment,’ but since this list is codified into public law, it has inadvertently restricted the VA to purchasing only items displayed on the list,” said DAV Assistant National Legislative Director Joseph Lemay.

The Automotive Support Services to Improve Safe Transportation (ASSIST) Act of 2025 (H.R. 1364 and S. 1726) aims to fix this critical limitation. By expanding the VA’s definition of “medical services,” the bill would provide the VA secretary with the flexibility to cover a broader range of medically necessary modifications. These include crucial modern equipment like ramp and kneeling systems, mobility lifts, raised doors or lowered

floors, adapted seating, and ingress or egress accessibility modifications.

“We take things like driving or riding in a vehicle for granted, but for some veterans, operating a vehicle can be challenging without the proper modifications,” said Sen. Tommy Tuberville, who sponsored the bill. “Alabama is home to more than 400,000 veterans, and we want to ensure that each of them has the necessary resources to lead safe, independent lives. The ASSIST Act is a commonsense piece of legislation that would give veterans access to needed vehicle modifications such as ramps and device lifts. I’m proud to lead the ASSIST Act in the Senate and will continue fighting to help the heroes who have sacrificed so much for us.”

This legislation would provide a vital fix by eliminating the discrepancy about what adaptive equipment the VA can provide to disabled veterans. It would ensure that the program can evolve with technology and better meet the needs of those it serves. The bill was passed by the House in May and is now being considered by the Senate Committee on Veterans’ Affairs.

“Every service-disabled veteran deserves the freedom and independence that comes with safe, reliable transportation,” said DAV National Commander Coleman Nee. “For those living with severe service-connected disabilities, that independence depends on adaptive vehicle equipment that allows them to travel safely to and from medical appointments and remain active in their communities, which is why DAV is proud to support this important legislation.” ■



Stay Informed

To take action on the ASSIST Act or other key veterans legislation, join DAV CAN (Commander’s Action Network) at davcan.org.

Steps toward FREEDOM

Narcolepsy turned a staircase into a daily danger for a 93-year-old Korean and Vietnam war veteran

By Matt Saintsing

Just 13 steps separate the first and second floors of the Duffies' home, but to 93-year-old Braven, it might as well be Mount Everest. The Army veteran, who served in the Korean and Vietnam wars, has been known to collapse suddenly and without warning, stirring fears of serious injury or even death on the stairs.

With his bedroom and bathroom upstairs, Braven had to climb up and down the staircase for life's most basic necessities, such as eating and leaving the home for medical appointments. To protect him, his son Winfred and his daughter-in-law Rena would stand in front of and behind him so they could catch him as he carefully navigated those steps.

"He was up and down those steps a lot," said Rena. "That's when we thought, we have to make a change."

Braven received service connection for narcolepsy, a disorder characterized by excessive daytime sleepiness, in 2004, thanks to DAV benefits advocates. His disorder also comes with cataplexy, a hallmark symptom of narcolepsy that includes sudden and brief loss of muscle control.

"He'll fall out almost like a seizure," said Rena. "So, if he's standing and has one of those attacks, he'll fall down."

However, when the Duffies sought help from the Department of Veterans Affairs for Specially Adaptive Housing (SAH) grants, they were consistently denied. It wasn't until they contacted DAV that they were able to make additions to the home that protected Braven and significantly increased his quality of life.

Braven earned those benefits during the Korean War while assigned to an artillery unit above the 38th Parallel. Today, he recalls the tumultuous uproars of American cannons.



Korean and Vietnam war veteran Braven Duffie is pictured while serving overseas.

"The loudness made me half deaf; I can't hear well, and I can't think like I'm supposed to," he said.

Despite this potentially debilitating condition, Braven continued to serve. Following a short break in service, he served in Vietnam and Germany until retiring in 1976, in part, from complications of narcolepsy.

"I got out, raised my family and came to my son's [house] because I was no longer able to live by myself," said Braven. "I was a hazard to myself."

Recognizing that keeping him on the second floor was unsustainable and dangerous, Rena and Winfred began searching for options. That's when they decided to reach out to DAV again in April 2024 and contacted National Service Office Supervisor Mark Donberger in Wilmington, Delaware.

"They kept asking for the grant, but they kept getting denied because cataplexy is not one of the black-and-white conditions to authorize an extension to a home,"

“I knew I was eligible for something besides going into a nursing home.”

—Braven Duffie



Braven (left) with his daughter-in-law Rena and son Winfred. The funds DAV secured helped to build Braven an addition and ramp to the Duffies' home (right).

said Donberger. “There’s certain things they allow, but for mental health or neurological conditions with the brain, the VA isn’t normally responsive to that.”

Donberger secured benefits through VA Aid and Attendance, another assistance program the Duffies had been denied, unlocking additional monthly payments for qualified veterans. He did so with a Supplemental Claim, one of three ways for veterans to dispute a decision, by submitting new evidence.

“The veteran loses control of his legs and feet. Other parts of his body do cause issues as well. He cannot be left alone and needs assistance for routine movement,” Donberger wrote in the Supplemental Claim.

For the grant, Donberger suggested filing an appeal. During a hearing at the Board of Veterans’ Appeals, Rena spoke in detail to the judge, testifying on the severity of Braven’s narcolepsy.

“She explained exactly what happened, and I continued saying the

cataplexy makes the narcolepsy a lot more serious,” said Donberger. “He was in fear for his life; they were in fear for his life.”

When the final decision granting Braven the SAH funds came down on Feb. 26, 2025—one year to the day of their first denial—the Duffies were elated.

“I knew I was eligible for something besides going into a nursing home,” said Braven.

The Duffies are particularly appreciative of Donberger’s efforts in navigating the dizzying world of VA claims.

“We just kept running into brick walls,” said Winfred. “Our frustration was just all of the bureaucracy and red tape, which was a major part of our frustration. But Mark got it done.”

Now, Braven lives on the first floor in an addition built using the grant money. Braven now has safety and privacy, and negotiating those 13 pesky stairs is a thing of the past, all thanks to DAV. ■



Donberger



DAV & Auxiliary
2026 NATIONAL CONVENTION

You could win \$2,500 and a trip to Orlando

Recruit one new DAV member
for a chance to snag a special
convention prize package

By Jonathan Kaupanger

Your mission is simple: Sign up just one fully paid new DAV member, and you'll instantly be entered to win the ultimate prize package for the 2026 DAV and Auxiliary National Convention in Orlando, Florida. Think sunshine, community and \$2,500 in spending money—hotel room included. Stop dreaming about a vacation and start recruiting your way to one.

The rules of the contest: Recruit one new paid member between now and June 30, 2026, and be automatically entered in the contest. There's only one entry per person, no matter how many new members you recruit. After June 30, we'll hold a drawing at DAV National Headquarters to pick the winner.

"One million members is more than a number—it's a nonnegotiable floor for our legislative strength," said National Adjutant Barry Jesinoski. "It's what commands attention on Capitol Hill. Let's strip the recruitment goal down to its simplest form: Find one. If every current nonrecruiter brought in just one new member, we don't just secure our advocacy; we exponentially multiply it. Don't worry about the total—worry about the veteran you can personally empower today."

And when you recruit more than one new member, besides being entered in the Recruiter Rally, you'll receive credits to purchase items from the DAV Store and other possible awards! ■

Scan the code or visit
dav.org/membership-recruiter-rally



DAV SUPER RECRUITER GIVES RECRUITING PRO TIPS

Recruiting members isn't easy for everyone. Besides the potential for rejection, selling anything is challenging for some people because it involves connecting with the "buyer." But according to one DAV "super recruiter," empathy is your superpower when selling a DAV membership.

"There might be one issue you're focused on, that you're passionate about—share that part of your passion," said Shannon Sander, a service officer for the Department of New York who recruited more than 150 members last year. "Let people know what DAV is fighting for that affects you and your family. Let them know what it was that made you join DAV."

One of the hardest parts of selling something is the potential rejection. People, in general, don't like hearing "no" because it feels like a limitation on their desires or plans. But not Sander.

"I take 'no' as a maybe," she said. "Because when I give them the information and my reason for joining DAV, the no right there turns into a maybe. Maybe they need to go home and talk to their spouse. Maybe they're too embarrassed to say they don't have a job right now. I never look at that no as a solid no to membership."

The final tip from Sander involves money, or rather, how to communicate the cost of joining.

"Don't pressure people to pay all at once," she said. "Often, disabled veterans are living on Department of Veterans Affairs disability compensation, and they have other bills. Remind them that they can take time to pay it, because DAV understands that a lot of disabled veterans don't have top-paying jobs, and they need more time to pay off a membership."

Guidance for recruiting new DAV members is available at dav.org under Member Resources. Click on the Publicity tile to find our recruitment resources, available in digital, print and video formats.

SEE YOU IN ORLANDO!





From the NATIONAL SERVICE DIRECTOR SCOTT HOPE

Expanding knowledge and impact

Representing veterans for their benefits claims has been DAV's cornerstone for more than a century. But to remain the leader among veterans organizations, we must always look for areas to grow and evolve.

Nowhere is that more evident than with DAV's Interactive Training, Resource, Advocacy and Knowledge system, known as iTRAK.

Introduced in 2016, iTRAK was more than a new piece of technology—it represented a strategic shift in how we train, support and empower those who advocate for America's veterans. The comprehensive toolbox includes regulations and training modules, giving our national service officers the ability to sharpen their skills and broaden their knowledge.

The influence it's had on veterans' claims cannot be overstated. The platform brings together Title 38 regulations; past decisions from the Board of Veterans' Appeals; and an immersive, interactive model that helps illustrate the life-changing effects of their disabilities. Put simply, iTRAK has raised the bar for what's possible within veteran advocacy.

DAV's mission has never been static, which is why we're continually updating iTRAK to keep pace with new information.

And now, we're expanding access beyond our national service officers to include our volunteer chapter and department service officers. These individuals are certified volunteers who make it their mission to help veterans and families navigate the complex process of filing for veterans benefits. They are often the first contact veterans make when interacting with DAV. By ensuring all necessary information and forms are properly filled out, they give our national service officers more time to secure the benefits veterans have already earned.

By equipping them with iTRAK, they'll have the same cutting-edge resources that have strengthened our professional benefits advocates.

This is more than innovation; it represents a promise that when our people—employees and volunteers alike—are armed with the right tools, they can deliver the very best to veterans. They'll deepen their understanding of what can be an arduous system that veterans must navigate, giving them greater confidence and effectiveness in their roles.

Nine years ago, we launched iTRAK—a leap forward in our ability to advocate and serve. Today, we're expanding the platform to chapter and department service officers—another leap that extends our reach and ensures every veteran who turns to DAV finds an advocate ready for the task.

When it comes to serving those who served us all, staying on the right track means continuing to evolve. ■

SAVE THE DATE

Sept. 6–10, 2026



2026 National Disabled Veterans Golf Clinic

From Sept. 6–10, the Riverside Hotel & Golf Resort in Riverside, Iowa, will once again become the epicenter for adaptive sports as the National Disabled Veterans Golf Clinic returns.

Veterans with blindness or low vision, traumatic brain injuries, amputations, spinal cord injuries, and other disabilities will experience the therapeutic benefits of golf and other athletic activities such as kayaking, biking and rock climbing during the weeklong event.

Dozens of coaches and hundreds of volunteers will ensure each participant has an experience tailored to their needs. The resource-rich program fosters opportunities for fellowship and camaraderie among the veterans—both returning participants and those discovering the benefits of adaptive sports for the first time. ■



Veterans must apply to participate. The application period begins Jan. 26, 2026. Visit veteransgolfclinic.org.



KEEPING OUR PROMISE TO
AMERICA'S VETERANS

VA



U.S. Department
of Veterans Affairs



ON PAR



Tracey Miller (right) has been with her golf buddy, Amy Letcher, for three clinics. Letcher's role is to help Miller navigate the course and provide coaching, but they've developed a friendship that has extended beyond the game.

At the National Disabled Veterans Golf Clinic, the partnership between golf buddies and veterans is a key to healing

By Brian Buckwalter

Tracey Miller exhaled slowly as she stepped up to the golf ball lying in the fairway and focused her mind on this next shot, just as she had been taught. Then, she drew her club back and swung with all her might.

She missed the golf ball completely; the momentum of her follow-through spun her around.

"There's the 'Texas Tornado,'" Amy Letcher said, laughing.

Miller smiled and pointed at Letcher, acknowledging she'd heard the nickname, before she lined herself up again, refocused and hit a solid approach toward the green.

Letcher's friendly teasing only lasted a moment. She quickly shifted to giving Miller feedback and coaching for the next shot.

"The first year, I could not hit at all," Miller said. "But she doesn't judge me, and she's always patient with me. She knows about my disabilities."

This was the third year they both came to the National Disabled Veterans Golf Clinic in Riverside, Iowa, and were partnered together all three years. Miller, an Army veteran of 30 years, is a participant. Letcher is her golf buddy—helping her navigate the course, the game of golf and sometimes even life.

Hitting a wall

After Miller retired from the Army in 2018, she said she hit a wall, struggling to fit in as she dealt with numerous medical issues.

"I thought I was really OK, but I wasn't," she said.

On deployment to Afghanistan in 2012, while she was at Forward Operating Base Mehtar Lam, Miller was injured by two enemy mortar rounds that struck near her. Her injuries included brain bleeding and a traumatic brain injury (TBI).

She spent the next two years in rehabilitation going through physical, speech and occupational therapy so she could stay on active duty, but the experience drained her self-confidence.

"I didn't really know if I was going to be a capable senior leader," Miller said. "But my care team did everything

they could do to prepare me so I could finish my military career, and they did a great job.”

When she retired, Miller said she was still dealing with the effects of her TBI. Her balance was off; she was struggling with cognitive function; and she was experiencing post-traumatic stress disorder, anxiety and depression.

“I did hit the wall,” she said. “I didn’t enjoy anything.”

Determined to change course, Miller sought help through the Department of Veterans Affairs Whole Health program at her local medical center in Temple, Texas.

There, she was introduced to adaptive sports, including equine-assisted therapy, rowing and golf. Her recreation therapist recommended she apply for the golf clinic, which is co-presented by DAV and the VA annually.

She was accepted to the program but anxious about going at first, “because when you have a brain injury and other [invisible] injuries, it’s like nobody understands,” Miller said. “But coming to this golf clinic and participating shows me that someone does understand when you have an invisible wound.”

She described the feeling of attending the first time as being embraced by a warm blanket and gave much of the credit for that to her golf buddy, Letcher.

“She’s always looking out for me,” Miller said. “She makes me feel secure and gives me confidence when I’m out there.”

“That’s what we do,” Letcher said. “That’s what I’m here for—to make her feel comfortable and help her have a good time and enjoy the experience.”

Golf buddies: The vital piece

Miller, a DAV member of Chapter 29 in Harker Heights, Texas, was one of more than 200 veterans who participated in this year’s clinic. Each participant has a qualifying disability to attend, such as low vision or blindness, TBI, spinal cord injury, or amputation.

Clinic staff—many of whom are VA prosthetists or recreation and occupational therapists—outfit participants with specific, customized adaptations to help them play and enjoy the experience. No two accommodations are the same and can range from high-visibility golf balls and auditory cues for aiming to prosthesis-compatible golf clubs and specialty carts to accommodate limited mobility.

The one thing all veterans have in common on the course is a golf buddy who’s with them the entire time.

While the clinic provides PGA and LPGA instructors; staff experts, like recreation therapists to train and fit participants with customized adaptive equipment; and medical teams to ensure everyone’s safety, it’s these golf buddies who make the game truly accessible.

“Golf buddies are as vital a piece as any for a veteran making it through this clinic and making it a rehabilitative experience,” said Nick Beelner, the clinic’s director. “That’s the person who’s right there with the veteran on the same golf cart to get them through the hole.”

They’re the ones driving carts, teeing up balls, helping participants navigate the course and helping aim their shots.

“Without my golf buddy, I would be lost,” said Rowena Darwin, an Army veteran who has low vision and experiences vertigo from a TBI. “I wouldn’t be able to do this without her or anybody.”

Judy Sogoian is Darwin’s golf buddy. It was her first time volunteering at the clinic, and it was done to honor her father, a Coast Guard veteran who participated in the D-Day landing at Normandy during World War II. He died in 2024.

“He made such a difference in my life,” Sogoian said. “And being here with other vets, it just brings it closer to home. This is such a great group; it’s like family.”



Miller received the clinic’s DAV Freedom Award for being the participant who best represents the spirit of the event. Miller said golf has helped her with her cognition, focus and anxiety and reminded her that life wasn’t over after injury.



Left: Rowena Darwin, an Army veteran who has low vision, said her golf buddy, Judy Sogoian, provides a sense of freedom that she otherwise wouldn't have on the course. **Center:** Clinic participant Anita Shorb stands with her golf buddy, Heidi Brown—who she jokingly calls her golf wife. **Right:** Shorb alongside her actual spouse, Glen Landenberger, who's also a participant. The two first met at the National Disabled Veterans Winter Sports Clinic in 2014.

Sogoian isn't a golfer, but Darwin said her help locating the ball and guiding her around the course and the conversations in the golf cart have lifted her spirits as she continues to face several medical diagnoses.

"It gives me that sense of, I still have that freedom of being partially independent and being able to feel free versus staying at home and being sorry for myself," Darwin said. "I think it's an amazing thing that she's doing for me."

Bonds and friendships like these are formed each year on the course, "and that's such an important part for the veteran," Beelner said.

Navy veteran Anita Shorb has been paired with her golf buddy, Heidi Brown, for many years. The two have become close friends and keep in touch throughout the year.

"She's my golf wife," Shorb joked within earshot of her spouse, Glen Landenberger, who's another clinic participant.

Shorb said that Brown and her husband's golf buddy, David McAdon, have given the couple a chance to bond in a way they otherwise wouldn't have. Shorb is blind and Landenberger has Parkinson's disease, which limits his motor function.

"A lot of times we just can't do the same things," she said. "So it's wonderful that we can do this. It's important for us and important for our marriage."

John Kleindienst, DAV's national voluntary services director, helps plan the golf clinic each year. He said he hears every year from participants how important golf buddies are to the veterans' overall experience of the clinic.

"They tell me how much these volunteers make them feel valued and seen," he said.

"For some veterans, those aren't words they use often. But year after year, I hear how much that interaction has been a turning point in a veteran's life and really been something that has altered the direction of their life going forward."

More than a game

That's the case for Miller. For her, golf has helped with more than just her cognition, focus and anxiety.

"It really made me feel good," she said. "It let me know that my life wasn't over, and I wasn't just going to retire and be a wounded veteran. Since coming to the golf clinic, I've become an extrovert again. I actually want to leave the house."

Seeing progress like this and playing a role in Miller's healing journey, Letcher said, is personally rewarding.

"It's a very humbling experience to come out here every year and work with Tracey and all the other veterans," she said, as she started walking toward Miller. She had a few things she wanted to go over with her grip and swing routine.

As they worked, Miller smiled.

"Maybe I won't be called the Texas Tornado forever." ■



Learn More Online

Miller received the clinic's DAV Freedom Award, given to the participant who best exhibits the spirit of the clinic. To see her story, visit veteransgolfclinic.org.



From the NATIONAL CAREGIVER SUPPORT PROGRAM DIRECTOR

RON MINTER



Take it for a spin

Imagine being handed the keys to a brand-new sports car with an invitation to drive a couple of laps around an empty racetrack. The top is down, the wind is racing through your hair, and the deafening roar of 1,000 horsepower is bellowing from the engine block. You don't have to be a car person or a thrill seeker to crack a smile at the thought of that scenario.

Now imagine never taking it past second gear.

To call that a squandered opportunity is an understatement, and it's akin to being a caregiver who doesn't take advantage of DAV Caregivers Support.

Caregivers deserve their own support. That's why the program exists and why thousands of caregivers have enrolled in it since its inception in October 2023. But considering how many disabled veterans need assistance with their basic needs, that number must grow exponentially as we continually work to evolve the program.

That's where you come in. If you're a veteran caring for a loved one, a veteran who relies on a caregiver, or a caregiver yourself, I encourage you to take the program for a spin around the track to see what it can do. It's also important that all of us let others know about it. Use social media, reach out directly, or hand them this magazine when you're done with it.

Make sure to tell them that the program will give them access to a tailored resource plan that can evolve with their needs. Let them know that the trained caregiver specialist they're assigned to will remain with them throughout their time in the program so they don't have to constantly explain themselves every time they contact a specialist. These specialists will connect caregivers to resources and plans and do all the research on their behalf to free up time for caregivers that they otherwise wouldn't have.

There's also a peer support Facebook page exclusively available to program enrollees, where they can gain additional insight from others about their caregiving journeys. And just like all DAV programs and services, you don't have to be a member to join or pay a single penny for any of it.

Signing up is easy. Visit davicaregivers.org and select "Click here to register." From there, you'll create an account and answer a few quick questions about your caregiving role. You'll then be contacted by a caregiver support specialist who will handle everything from that point on.

So now you have the keys. It's up to you to put the pedal to the metal. ■

Caregivers deserve their own support.

That's why the program exists and why thousands of caregivers have enrolled in it since its inception in October 2023.



Cynthia Milano prepares the week's medications for her husband, Kevin. She's been his caregiver for a decade after noticing symptoms that likely stemmed from traumatic brain injuries that occurred while he was in the Army.

A life of care

When her husband's brain injury symptoms worsened, Cynthia Milano discovered the meaning of caregiving

By Brian Buckwalter | Photos by Precious Depictions Photography/Lorena Diaz

No matter what, Kevin Milano makes sure fresh flowers are always on the kitchen counter for his wife, Cynthia. “He is the sweetest, funniest guy,” she said. “And he’s the best husband. He really and truly is.”

The flowers are a daily reminder and a glimpse into the heart of the man she met 19 years ago at his family’s hardware store in Stockton, California.

She came into the store looking for parts for her car. He had recently gotten out of the Army and was working the register.

Cynthia got her car parts. Kevin got her number.

They started dating in early 2007, and the relationship quickly became more serious. Both had been married before and were raising children from those relationships, but everyone was excited to build a new life together.

Cynthia remembers the first time her son met Kevin’s two boys. They formed an instant bond as Kevin’s oldest grabbed the other two and pulled them in close, saying, “We’re family now; you’re not going anywhere.”

The couple got engaged later that year, welcomed their daughter in 2008 and were married in 2010. Their three-bedroom ranch was bursting, and they were happy.

Then about 10 years ago, Cynthia noticed that Kevin was becoming more forgetful than usual.

“He’s always had little things—I would call them ‘little blips’—that would get lost in translation,” Cynthia said. “I always thought that was just his personality.”

“But one day he left 17 cups of coffee throughout the house. Then he was calling the kids the wrong names.”

Concerned, she took him to a doctor. An MRI revealed a lesion on the brain.

In the Army, Kevin had experienced two traumatic brain injuries (TBIs).

One came from a falling pipe and another during a field training exercise. He was at Fort Irwin, California, participating in oppositional force training for a unit preparing to deploy. In a simulated riot, he stepped out of a shipping container, rolled his ankle, hit his head on the back of the container and was knocked unconscious.

Years later, Kevin’s battle buddy told Cynthia what had happened. The unit had to continue with the simulation, so no one knows how long he was unconscious. This was on the second day of a two-week exercise, and leadership didn’t pull him from the field. Instead, he continued the exercise wearing an air cast and using a cane made from a two-by-four.

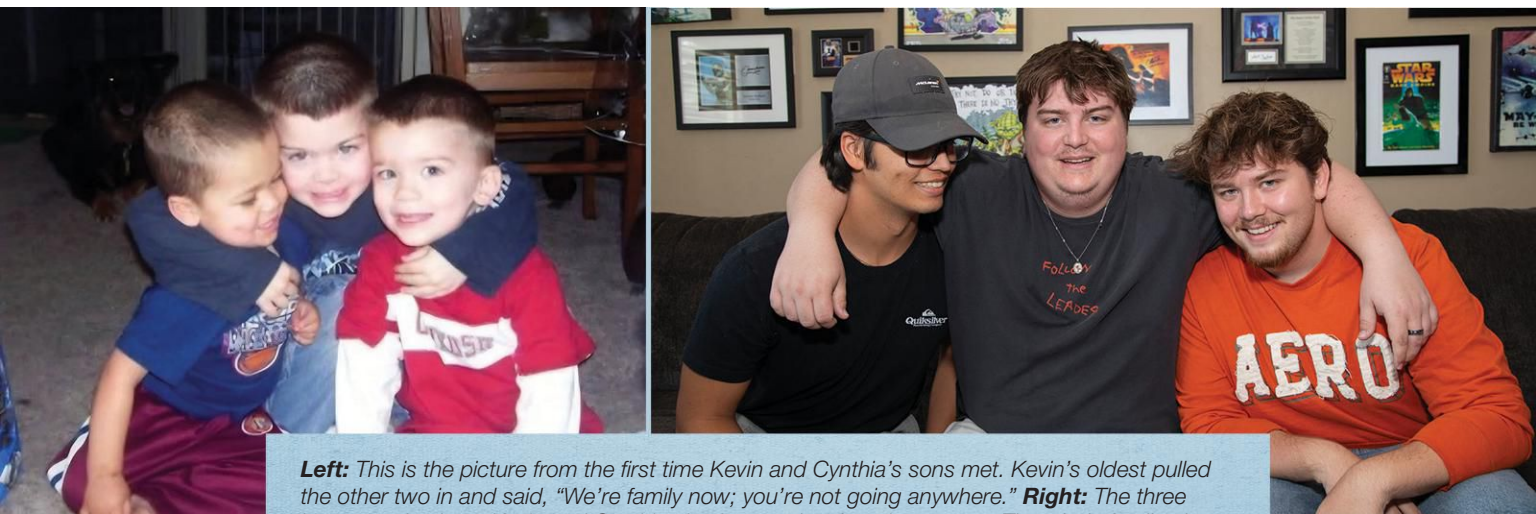
The doctor told Cynthia that the brain lesion could have come from those head injuries and that TBIs earlier in life can be masked by the brain’s plasticity, but as one ages, more symptoms can appear.

Kevin’s symptoms rapidly got worse. Additionally, his doctors discovered a vitamin B12 deficiency, Parkinsonism and ataxia—conditions that can affect his balance, movement, speech and memory.

He began wandering away from the house, forgetting to take his medications and falling. And at times, either because of surgeries to repair problems stemming from his ankle injury or his neurological issues, he had to rely on a wheelchair to get around. Cynthia took on the role as his caregiver.

“When he first got sick and couldn’t take care of himself, that was hard because our life abruptly changed,” Cynthia said. “I didn’t have a partner; I had somebody that I had to take care of.”

But instead of feeling hopeless, the Milanos faced the change head-on.



Left: This is the picture from the first time Kevin and Cynthia’s sons met. Kevin’s oldest pulled the other two in and said, “We’re family now; you’re not going anywhere.” **Right:** The three boys remain close. Kevin and Cynthia also have a daughter, born 2008. The whole family plays a role in Kevin’s caregiving.

“I am the ultimate positivity person,” Cynthia said. “And we figured it out. We attack each day. I don’t want him to ever feel like it’s a burden—and I don’t feel like it’s a burden. We’re family. That’s what you do.”

Not knowing who to go to for caregiving guidance at the time, Cynthia took it upon herself to adapt their home and life to Kevin’s needs. She installed grab bars in their bathroom, lowered the bed for transfers and installed cameras to monitor his movements. She prepares his lunches, sets alarms to remind him to take his medications and creates checklists to keep him engaged throughout the day.

The children eagerly pitch in to help.

“I always say I’m one of the lucky ones, because I have four kids who will drop anything at any time to come and help,” Cynthia said. “We divide and conquer everything.

to describe how much energy he has for the day, with each activity “costing” a certain number of spoons.

The questions allow Cynthia to gauge his memory, energy and mood and whether he may be prone to wandering.

“Our days change by how he is,” she said.

Through the challenges there have been bright spots, too. As his children grew, Kevin’s fun-loving personality made him popular with their friends. The Milano house was the place to hang out. He coached their water polo and soccer teams. Former players still send him pictures and updates of how they’re doing.

“He had so much fun with these kids. And he made an impact on them because of the way he coached and his personality,” Cynthia said. “We’re so lucky we have Kev, because he’s definitely the glue.”

“For me, I get to read a book, to go to sleep, to do something for myself. Because when you’re taking care of somebody else, you don’t get time for yourself. It gives you an hour or two to just relax. I don’t have to worry.

—Cynthia Milano



That’s been our motto since these guys were little: It’s all hands on deck. So no matter what’s in front of us, we all work together.”

Some days are better than others, and Cynthia knows what kind of day it’s going to be by how Kevin answers five questions when he wakes up:

What’s your name?

What are we doing today?

What did we have for dinner last night?

What’s your mood today?

“And now the new one is, ‘How many spoons do you think you have for the day?’” Cynthia said.

Kevin’s occupational therapist recommended the question, using the metaphor from the 2003 essay “The Spoon Theory” by Christine Miserandino. It allows Kevin

As a caregiver, Cynthia has navigated this journey largely alone. Even though Kevin requires 24/7 care, he doesn’t qualify for the Department of Veterans Affairs Caregiver Program. Her schedule—from showering to grocery shopping to work—revolves around Kevin’s need for constant supervision.

But recently she found some relief.

One of Kevin’s VA doctors suggested recreational therapy as part of his care. So earlier this year, Cynthia took him to the National Disabled Veterans Winter Sports Clinic, which is co-presented by the VA and DAV every year.

“Going to the winter sports clinic was the most time I’ve ever gotten to myself in probably 18 years,” Cynthia said.

While he skied and participated in the clinic’s other adaptive sports, she, along with more than a dozen other

caregivers, gathered for workshops put on by DAV.

The clinic's caregiver program, established in late 2024, seeks to empower caregivers with evidence-based programs and resources, including DAV Caregivers Support, a no-cost service that gives caregivers of veterans and veterans who are caregivers personalized care plans and one-on-one support from trained specialists.

"We never want someone who is caring for a loved one to feel isolated or at a loss of where they can turn for help," said Ron Minter, who directs DAV Caregiver Support. "We've designed all aspects of our program to be lifelines for caregivers and something they can look to, to know they are seen and valued for the role they play."

For Cynthia, those workshops allowed her to share her experiences and learn from others in a supportive, understanding environment. But the most impactful thing

Fifteen minutes later, Cynthia got an email full of local resources she didn't even know existed, including a local golf program five minutes from her house, adaptive surfing, guitar lessons and a skiing program near Lake Tahoe—all at no cost.

"Giving him something to do has been absolutely magical, because he gets to meet other people that have the same mindset he does," she said. "For me, I get to read a book, to go to sleep, to do something for myself. Because when you're taking care of somebody else, you don't get time for yourself. It gives you an hour or two to just relax. I don't have to worry."

Cynthia's support specialist has a scheduled call with her every two months and encourages her to keep a list of things she or Kevin may need—there's likely a resource available.



To help Kevin maintain his independence and keep him engaged throughout the day, Cynthia has come up with systems so that he can navigate their home, including checklists of tasks he can do and labels on his dresser and food pantry shelves. She has also modified their bathroom and bedroom to accommodate his limited mobility. Cameras installed throughout the home allow her to keep an eye on him even when she is running errands or at work.

for her came from a conversation with another caregiver who recommended she sign up for DAV Caregivers Support.

"She goes, 'Just apply for it. You'll thank me later,'" Cynthia said.

She did it that day and got a phone call an hour and a half later from one of the support specialists to go through the intake questionnaire. The immediate response and focus on her needs were unexpected.

"I just sat there, and I cried," Cynthia said. "She was the sweetest thing ever, and it was wonderful."

A week later, Cynthia talked with a support specialist who explained the program in detail and asked what help she needed, from support for her own mental health to resources and activities nearby Kevin may be interested in.

"She's taking the stress off of me trying to find these things, because everything is well-hidden; it's like an Easter egg hunt," Cynthia said.

But of all the offerings DAV Caregivers Support gave her, perhaps the most meaningful was a simple identification card that she could put in Kevin's wallet.

It listed her as his caregiver. In all the years of navigating VA care, no one had called her that.

"To get that one thing absolutely melted me," Cynthia said, "because for once, I was getting validation that I am his caregiver. I'm not just his wife." ■

For more information

To learn more and sign up for DAV Caregivers Support, visit davicaregivers.org or call 800-421-5137.

THE (VETERANS) MENOPAUSE — CLUB —



For women who served, this time of change can be particularly challenging

By Elizabeth DePompei

Just a few days after her 50th birthday, Army veteran Lucy Del Gaudio woke up in a full sweat—the start of a serious health struggle that took her by surprise.

“Welcome to the menopause club,” her friend told her the next day.

Soon after entering a club she wanted no part of, Del Gaudio experienced bloating, weight gain and dizziness. A marathon runner, she stopped training after a dizzy spell knocked her off her feet, resulting in a broken shoulder. On top of that, she was hit hard by depression.

“The low was really low,” Del Gaudio said.

Usually beginning in women’s mid-40s, the transition into and throughout menopause brings fluctuations in hormone production and is often accompanied by physical symptoms, including hot flashes and night

sweats; sleep disruption; body aches; weight gain; incontinence; memory problems; and changes in bone, heart and sexual health.

This period has been shown to double the risk of depression and corresponds to the highest rates of suicide among U.S. women. For women who served in uniform, the experience of menopause can be even more challenging when factoring in post-traumatic stress disorder (PTSD).

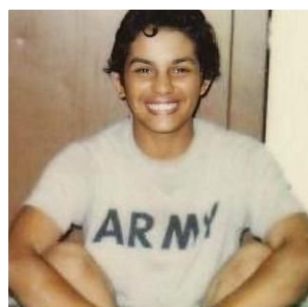
Of the roughly 600,000 women who use Department of Veterans Affairs health care, nearly half are between 45 and 64 years old, spanning the typical life cycle of menopause. Even for younger veterans, there are indications that some may be at higher risk for early menopause.

Yet a recent DAV report showed that the impact of menopause on veterans is undefined and understudied, particularly when it comes to mental health and suicide risk. And while the VA has invested significantly in women’s health, including menopause, a recent review suggests room for improvement.

“Given the growing population of women who served and the age range of women using the VA, it is critical that



Army veteran Lucy Del Gaudio was hit hard by menopause symptoms, which may have been worsened by her experience with military sexual trauma. Now she receives estrogen treatments through the Department of Veterans Affairs.



Shannon Sander, an Air Force veteran of the Gulf War, was thrown into early menopause at age 26. Now 52, she's at higher risk of fracturing a bone due to menopause-related osteoporosis.



we ensure the VA and Congress are appropriately investing in menopause-related research, education, outreach and care,” said DAV National Legislative Director Joy Ilem.

“The stakes are high, and our women veterans—many of whom sacrificed their health in service to the nation—deserve nothing less.”

‘EXACERBATE SYMPTOMS’

Del Gaudio’s menopause symptoms may have been heightened due to the military sexual trauma (MST) she said she survived while on active duty. According to the VA, 1 in 3 women report having experienced MST.

That trauma can have far-reaching effects, including in menopause. One study of midlife women enrolled in VA health care in California showed that exposure to MST was associated with “clinically significant menopause and mental health symptoms.”

“Women veterans having a higher prevalence of mental health conditions, as well as having experiences including trauma and environmental exposures, that can all sort of exacerbate symptoms that are associated with menopause,” said Dr. Sally Haskell, deputy chief officer for the VA Office of Women’s Health.

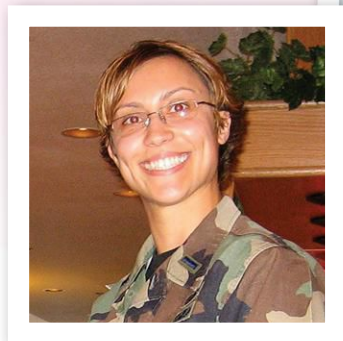
According to a VA study of nearly 700 Gulf War-era women:

Those with **PTSD** had a nearly **2.5X** higher risk of early menopause, while those with **toxic exposures** had **83%** higher odds.

When Shannon Sander was thrown into early menopause at 26 as part of treatment for endometriosis, a potentially painful and debilitating condition affecting the uterus, she started “sweating through sheets two to three times a night” and was always on edge. She also had to reckon with not being able to give birth to children as planned.

“I was 100% a bomb waiting to explode every day,” she said. “It was miserable.”

Sander served in the Air Force during the Gulf War in areas with known toxic exposures. She also has PTSD related to MST. Both experiences may have worsened



Air Force veteran Maria Luque is the founder of Fitness in Menopause, a supportive online community and fitness coaching service for women in menopause. Luque is also a menopause coach for Respin, a company founded by Academy Award-winning actor and advocate Halle Berry.

her menopause symptoms, and she's not alone in being a Gulf War veteran who experienced early menopause.

According to a VA study of nearly 700 Gulf War-era women, those with PTSD had a nearly 2½ times higher risk of early menopause while those with toxic exposures had 83% higher odds.

Haskell said the research on early menopause among women veterans is one of the areas where “a lot more work has to be done to understand” the implications.

Now, at age 52, Sander said she has a 10% higher risk of fracturing a bone due to menopause-related osteoporosis. She's also one of countless veterans living with chronic pain, something research shows may also be exacerbated by menopause.

‘THE HAPPY MIDDLE’

Hormone replacement therapy, or HRT, has become an increasingly popular treatment option in which hormones like estrogen and progesterone are administered to replace or supplement hormones that the body has stopped producing in sufficient quantities.

Initially hesitant, Del Gaudio took estrogen for her menopause symptoms after working closely with a VA gynecologist. Within 30 days, her symptoms had lessened.

“I feel like my life is much, much better,” she said.

Dr. Susan Diem, staff physician at the Minneapolis VA women's clinic, has witnessed the pendulum swing on HRT use—from providers giving everyone HRT to backing off after research indicated an increased risk for breast cancer and cardiovascular events. Those risks were later found to be particular to women in their 60s. Diem said providers can now feel comfortable prescribing HRT to younger women, depending on their unique health histories.

“There still is uncertainty about long-term use, and so it's still the case that the goal is to limit its use,” Diem said. “I think the trick is for us not to swing too far back again and to find the happy middle.”

In addition to HRT, Haskell said the VA takes a whole-health, multidisciplinary approach to menopause that includes mental health and interdisciplinary therapies like yoga, along with specialists for things like gynecology, cardiology and musculoskeletal health.

Air Force veteran Maria Luque has studied menopause for roughly 15 years. As a fitness coach with a doctorate in health sciences, she's a strong proponent of using movement to navigate menopause and improve overall health.



Diem



Haskell

“Women veterans having a higher prevalence of mental health conditions, as well as having experiences including trauma and environmental exposures, that can all sort of exacerbate symptoms that are associated with menopause.”

—Dr. Sally Haskell, Deputy Chief Officer,
VA Office of Women’s Health

“When we’re looking at the quality-of-life loss that a lot of women experience during menopause for different symptoms, adding physical activity or changing how you exercise or move can be very positive on how you experience menopause and even influence some symptoms,” Luque said.

But Luque warned there’s no one-size-fits-all magic pill for menopause—an important reminder at a time when menopause is dominating mainstream conversations and people are profiting off “snake oil” solutions.

“If it’s too good to be true, or someone preys on your fear or your pain points, they are generally not to be trusted,” Luque said.

‘CLOSE THE GAPS’

In June, the VA released findings from a review of menopause support needs. Diem, the lead author, said the review found a need for more primary care provider training, more availability of menopause-informed specialists and more patient education. Haskell said all women’s health primary care providers are trained on menopause, but there’s a need to ensure the entire primary care workforce is sufficiently trained.

Haskell also confirmed that the VA and Department of Defense are working on clinical practice guidelines for menopause care, and the Government Accountability Office is working on an extensive review of menopause care at the VA.

The June review also found an interest in menopause support groups, the kind of thing Luque said can be crucial in life transitions.

“Women are realizing that they’re not alone in this space,” Luque said. “And knowing that is truly magical when women realize that there’s a community.”

It’s one reason she became a head menopause coach at Respin, a company founded by Academy Award-winning actor Halle Berry. The website, re-spin.com, offers science-backed, expert health coaching and a community of support, and Berry regularly advocates for legislation filling some of the resource gaps, including for women veterans.

“Our American veterans have served and sacrificed so much for this country, and of the many challenges they face upon reentering civilian life, accessing health care shouldn’t be one of them,” Berry told DAV.

“At Respin, we are fighting not only to create innovative health care solutions to meet the needs of women in midlife but are also advocating for policy change to close the gaps in research and care access—bills like the Servicewomen and Veterans Menopause Research Act and the Advancing Menopause Care and Mid-Life Women’s Health Act are essential!”

As women’s health care continues to evolve at the VA, one hurdle will be making sure women know what care is available to them and rebuilding trust with those who have had negative experiences, like Sander.

Sander ultimately left the VA for a few years and sought women’s health care elsewhere. She said that left gaps in her medical record, making it difficult to seek service connection for certain conditions.

When Luque and Del Gaudio had negative experiences, they reported it up the chain. Today, they’re both satisfied with their women’s health care at the VA.

“I want to just encourage everyone to give the VA another try and to demand that they’re being seen and treated for whatever their symptoms are,” Luque said. “Because each woman who [comes back] makes a difference ... [and] that correlates to more resources.” ■

WALKING THROUGH FIRE

Even with annual labs, Army veteran's cancer diagnosis was missed until it had progressed to Stage 4

By Liz Stetler

On a March evening in 2025, DAV life member and Army veteran Jeff Slotnick began to hiccup. His hiccups intensified to the point where he couldn't breathe, and by 11 p.m., his wife, Nancy, had to rush him to the medical center on Joint Base Lewis-McChord.

After stabilizing him and reviewing his X-rays and CT scan, the doctor found the cause of his hiccups: a 9-centimeter tumor on Slotnick's liver pressing on his diaphragm.

Things moved rapidly from there. Results of a biopsy came back positive for liver cancer. But that wasn't the worst part.

Slotnick had Stage 4 cholangiocarcinoma, or bile duct cancer.

"The prognosis presently is incurable but treatable," he explained. "That means if I survive, I will probably need to have chemotherapy for the rest of my life."

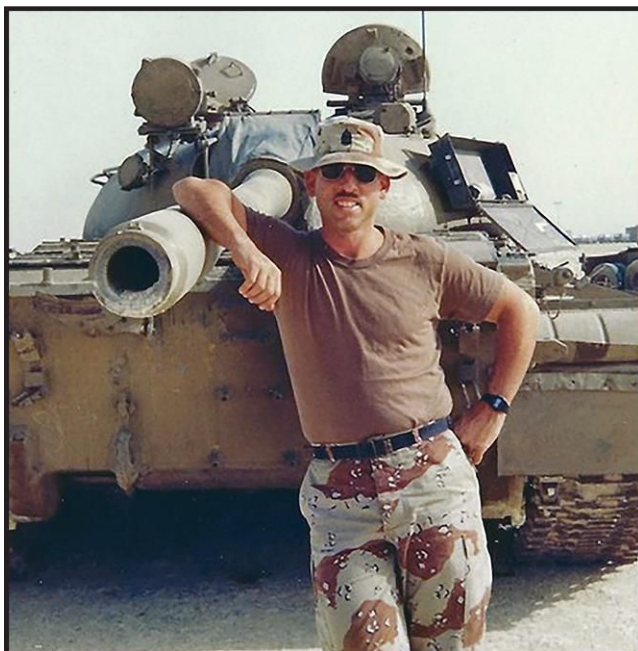
As a Gulf War veteran with 21 years of service, Slotnick has care that's covered through the Department of Veterans Affairs under the PACT Act, a landmark law signed in 2022. The PACT Act expanded VA health care and benefits for veterans exposed to toxic hazards or materials.

But Slotnick's case underscores a troubling gap. He visited his VA primary care doctor for

annual screenings and labs, yet his cancer wasn't detected until it had already progressed to Stage 4.

"It has since been determined that my cancer was most likely caused by toxins that I was exposed to in the military," Slotnick said. "I wasn't thinking about it in my 20s."

Slotnick's case isn't singular. Gulf War and post-9/11 veterans were exposed to burn pits, oil fires, pesticides and other toxins. While the PACT Act ensures coverage



Jeff Slotnick served as an Army combat engineer and deployed all over the world, including Honduras and the Middle East, where he was exposed to explosives residue, chemicals and contaminated soil. Now, he advocates for toxic-exposed veterans to learn their risk factors before it's too late.

once a presumptive condition is diagnosed, veterans aren't routinely screened for these diseases.

By the time cancers like cholangiocarcinoma are discovered, surgery is often no longer an option. Even when surgery is possible (for localized, non-metastasized cases), it often doesn't completely remove the cancer. Once the disease reaches Stage 4, the cancer has spread into other organs, and treatment focuses on slowing progression, not curing it.

In early 2024, Slotnick's annual blood work from the VA showed high cholesterol, diabetes and liver issues. Later that year, persistent abdominal aches drove him to see a civilian specialist. Even with an ultrasound, the tumor on his liver went undetected. His doctors attributed symptoms to lifestyle. In reality, cancer was advancing.

Now, between chemotherapy treatments at the Fred Hutchinson Cancer Center in Seattle, Slotnick's new mission is to advocate for earlier detection through regular screenings for presumptively exposed veterans and ensuring the VA, Department of Defense and civilian providers can seamlessly share medical records so no clues are missed.

"Veterans shouldn't fall through the cracks because one system can't see what another already knows," said Jon Retzer, deputy national legislative director at DAV. "Full electronic health record integration and interoperability between the VA, DOD and community providers isn't just about modern health IT—it's about ensuring safety; supporting seamless care coordination; and delivering comprehensive, quality health care.

"When every provider has the full picture, veterans get faster diagnoses, better treatment options, and the care they deserve and earned."

Despite the grueling treatments, Slotnick remains positive.

"Combat service prepared me for what I'm going through now," he said. "I have to walk through live fire to get to the other side."

His wife, Nancy, who is also a veteran, has been with him through the treatments and long nights.

"I couldn't do this without her," Slotnick said.

He refers to his new routine as his "battle rhythm," finding strength in moments with family, practicing gratitude and finding hope that his advocacy can spare others.

"When I wake up in the morning, I look outside, I see the trees, I see the birds. I'm more aware of the good things that I have. I'm more aware of the little moments," Slotnick said. "I can't change my diagnosis, but I can make sure other veterans don't get theirs too late. That's my mission now."

Slotnick's story is a sobering reminder that while the PACT Act has expanded access to care for toxic-exposed veterans, early detection remains the missing piece. DAV and MOAA's *Ending the Wait for Toxic-Exposed Veterans* report (endingthewait.org) calls for systemic improvements in how the VA identifies, screens and cares for veterans with toxic-exposure-related conditions.

For veterans who served in areas where they may have been exposed, the message is clear: Don't wait, advocate. Talk to your provider about screenings, and visit benefitsquestions.org for help filing a claim. ■



Nancy and Jeff Slotnick's love story began in the military. Decades later, Nancy's support and encouragement throughout Jeff's illness have been steadfast.

WHAT VETERANS SHOULD KNOW

- **Know your risks:** Burn pits, oil fires, pesticides or other environmental exposures correlate with higher risks of certain cancers and respiratory illnesses.
- **Don't wait for symptoms:** Request annual blood screenings to catch early cancer indicators—and don't take no for an answer.
- **Share your history:** Make sure every doctor you see (VA, military or civilian) knows your service history and potential exposures.
- **Get support:** Accredited service officers with DAV can help you understand your benefits, file claims and access the care you've earned. Learn more at benefitsquestions.org.

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From the AUXILIARY NATIONAL COMMANDER MELISSA L. PIERCE



This season, adopt a veteran

As we enter the final months of 2025, our hearts and minds turn to the spirit of giving and gratitude that defines this season. This time of year is a poignant reminder of the sacrifices made by our nation's heroes—our veterans. They have given so much to protect our freedoms, and it's our honor and duty to give back to them and serve with intention.

The DAV Auxiliary has had an incredible year of service. We've seen our members dedicate countless hours to volunteering at Department of Veterans Affairs hospitals, organizing events for veterans and providing much-needed support to military families. Your tireless efforts have made a tangible difference in the lives of those who have served. From simply visiting a veteran's bedside to hosting a large-scale fundraising event, every act of kindness—no matter how small—matters deeply.

The holidays are a time for giving and togetherness, and they're also a perfect opportunity for us to reflect on our mission and serve those who have served us. As winter approaches, I encourage you to join our #DAVAImpact250 campaign. Our goal is to honor veterans with 250 collective acts of service leading up to our nation's 250th birthday. A meaningful way to get involved is by adopting a veteran for the holidays—an idea that always makes a difference.

Whether you choose to do this as an individual or as a unit, find a veteran in need of assistance, whether you're shoveling snow, providing gifts or meals, or simply spending time with them to combat loneliness. You can connect with your local VA or county veterans affairs office to find a veteran or family in your community who could use some extra support. The goal is simple: Show up, meet their needs, and demonstrate our gratitude.

This festive time of year, let's recommit ourselves to our mission. It's a time to reflect on the meaning of service and to honor the legacy of those who have worn the uniform. I encourage each of you to find a way to connect with a veteran in your community. Whether you're sharing a holiday meal, writing a thank-you note or simply listening to their stories, your presence and gratitude can be the greatest gift of all.

We're more than an organization; we're a family. The bonds we share are forged in a common purpose: to support our veterans and their families. As we look ahead to 2026, let's carry this spirit of camaraderie and compassion with us. Together, we remain a beacon of hope and strength for those who have sacrificed so much.

On behalf of the DAV Auxiliary, I wish you and your loved ones a very happy and peaceful holiday season. May your days be filled with joy, and may the new year bring us all closer to our shared goals. ■

Auxiliary ignites action at 2025 fall conference

From meeting to action: Auxiliary volunteers mobilize for immediate veteran impact

By Jonathan Kaupanger

More than 300 members of the DAV Auxiliary—representing 36 states—convened in Lawrenceburg, Indiana, Sept. 25–27 for the 2025 DAV Auxiliary Fall Conference.

This three-day event wasn't just a meeting; it brought together leadership and dedicated volunteers from across the country to chart next year's course for supporting disabled veterans and their families.

The Auxiliary was reminded of the organization's vital role as a compassionate and unwavering partner to DAV when special guest speaker National Commander Coleman Nee told members that they are the "heart and soul" of the Auxiliary.

A significant focus of the address was on the critical issue of caregiving. Nee emphasized that the sacrifices of disabled veterans are shared, highlighting veteran caregivers as "unsung heroes" and the bedrock of support. "You are our partners in every sense of the word," said Nee. "You carry our mission forward with compassion, grace and unwavering commitment."

The Auxiliary's support of DAV Caregivers Support, as well as its own grassroots efforts on behalf of caregivers, was specifically lauded for its range of programs and services that help lighten the load for these individuals,

aligning with DAV's own support structures and showing a heartfelt commitment to ensuring caregivers get the resources, financial assistance and emotional support they deserve. This united front between DAV and the Auxiliary is seen as essential to making sure no caregiver takes this demanding journey alone.

The fall conference served as a crucial tactical checkpoint following the larger DAV and Auxiliary national convention in August. That convention, held this year in Las Vegas, was where the foundation was laid, culminating in the election of new leadership, including Auxiliary National Commander Melissa Pierce, and the passing of significant resolutions that set the legislative agenda.

The energy in Lawrenceburg was electric; attendees quickly converted that momentum into action. The conversation moved decisively from strategy to specific, actionable goals, clarifying exactly where Auxiliary resources must be focused for the remainder of the year and into the next.

"This fall conference was all about turning our strategy into concrete action," said Pierce. "We took the momentum from our national convention and used it to define next steps. We're ensuring every Auxiliary resource is focused where it matters most: delivering tangible results and support to our disabled veterans and their families in the year ahead." ■

DAV Auxiliary
Making a Difference

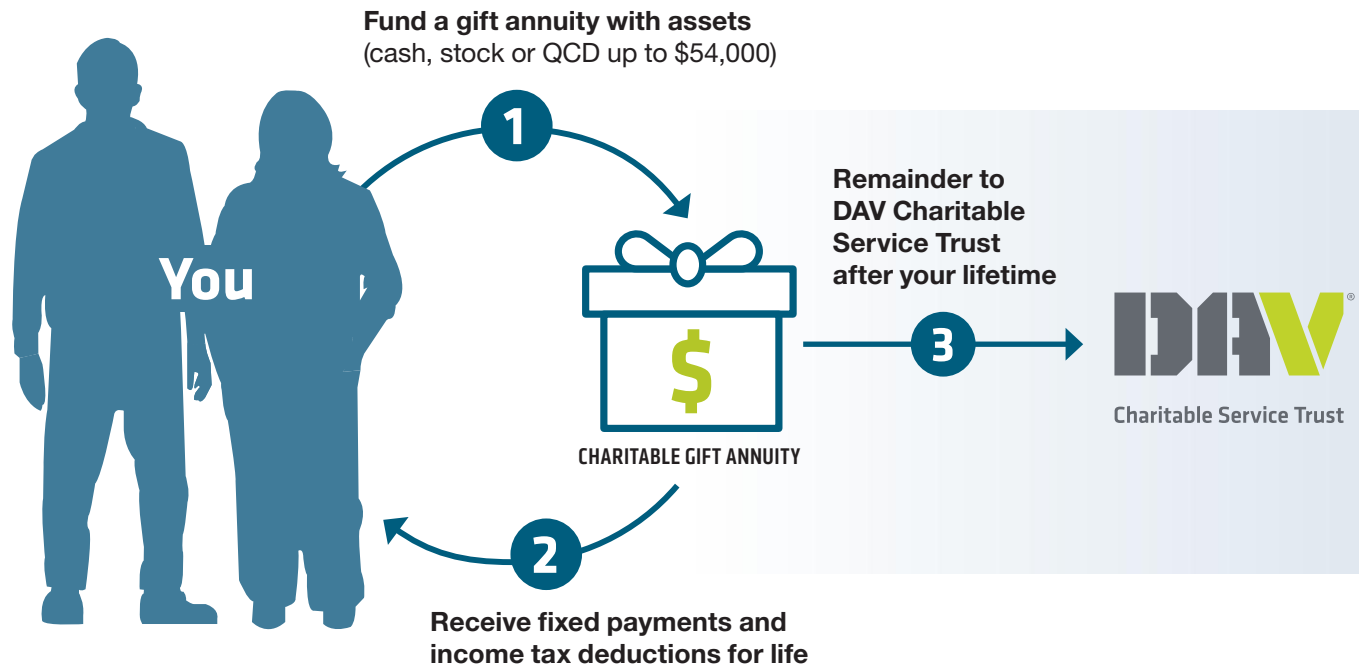


Amid a sea of dedicated faces at the DAV Auxiliary 2025 Fall Conference, the organization proudly welcomed 44 new attendees this year. Their presence strengthens the Auxiliary's commitment to supporting our nation's veterans and their families. **Top right:** DAV National Commander Coleman Nee and DAV Auxiliary National Commander Melissa Pierce. **Middle left:** DAV Auxiliary National Adjutant Bunny Clos officially kicked off the event. **Bottom (left to right):** Nee stands with DAV Washington Headquarters Executive Director Randy Reese; Auxiliary Junior members hold a unique blanket they designed to be sold in the Auxiliary store; and Ron Minter, DAV's national caregiver support program director, was on hand to give an update on DAV Caregivers Support.

CHARITABLE GIFT ANNUITIES

Secure income for your retirement **and help veterans**

A charitable gift annuity (CGA) is a gift that pays you for a lifetime. A gift of \$10,000 or more to fund a CGA can provide you with regular payments for life and allow the DAV Charitable Service Trust to further its mission. You can also qualify for a variety of tax benefits depending on how you fund your gift, including cash, stock or qualified charitable distribution (QCD). Rates are based on your age. Even at 60, the minimum age to fund a CGA, rates are 5.2%. That's better than a high-yield savings account, and these rates are guaranteed not to change once the gift is funded. **Here's how it works:**



Not yet 60 years old? Consider a deferred gift annuity. Payments start at a set date after you turn 60, and you get an immediate charitable deduction when the gift is funded.



Contact a gift planning expert at **800-216-9802, press 1**, or email **giftplanning@dav.org**.

To learn more, please fill out and return the postcard or visit **davplanmygift.org/charitable-gift-annuities**.

VA offers yearlong community care authorizations



■ In August, the Department of Veterans Affairs announced changes that will improve veterans' access to health care by extending the length of new VA community care authorizations to one year for 30 standardized services. This policy update is a major step toward providing more consistent, uninterrupted health care for veterans.

Veterans referred by the VA for eligible standardized care will now have a full 12 months of uninterrupted treatment covered by the VA. This change eliminates the need for reauthorizations that previously occurred every 90 to 180 days for some specialty services.

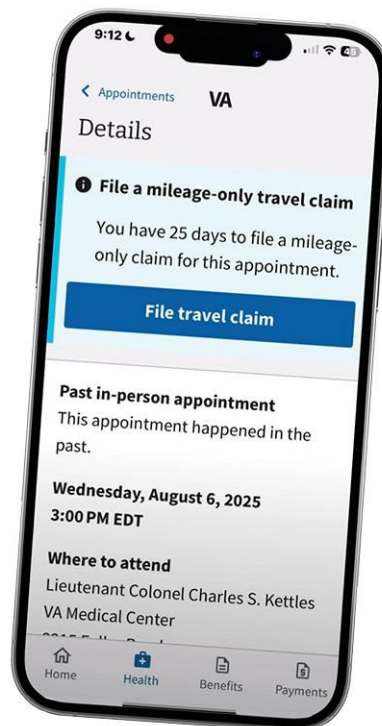
The new policy is expected to reduce administrative burden on veterans, their caregivers and VA staff. It also ensures a more seamless care experience and a greater sense of continuity for those receiving treatment in the community.

Veterans with questions about this change are encouraged to contact their local VA medical center's community care office.

Travel claims submissions now available on VA mobile app

■ The VA announced in August that eligible veterans can now submit and track mileage-only travel claims directly from a smartphone or mobile device through the VA: Health and Benefits mobile app. This new feature streamlines the reimbursement process, potentially reducing the number of paper claims and the time it takes to process them.

The app automatically identifies when a veteran's VA appointment may be eligible for mileage reimbursement



and displays a prompt on the home screen, allowing for quick submission with just a few clicks.

To be eligible for this and other health care travel reimbursements, veterans must meet certain criteria, such as traveling for treatment of a service-connected condition; receiving a VA pension; having an income below the maximum annual VA pension rate; being unable to afford travel; or traveling to attend a scheduled VA claim exam, get a service dog or receive VA-approved transplant care.

For more information about the app and its features, including where to download it, scan the code or visit the official VA mobile page at mobile.va.gov/app/va-health-and-benefits.





From the NATIONAL CHAPLAIN DEBRA VARNER DANCER

A life of unity



Throughout DAV's history, our members have faced immense challenges and achieved remarkable victories for disabled veterans. We have done so by standing as one—united in purpose and resolve.

Unity is the joining of talents, strengths and resources toward a common goal. Time and again, we've overcome threats to our survival by leaning into one another, recognizing that our combined strength is far greater than our individual efforts.

Together, we stand up for every ill and injured veteran. Together, we cast aside differences so that all who need us know we're here for them. Together, we create an environment of trust and support for our colleagues, our families and our fellow veterans.

Unity isn't always easy. It requires self-discipline, humility and the willingness to see the good in others. It calls us to set aside our own interests and listen with compassion. Yet when we practice these virtues, the rewards extend far beyond ourselves—they ripple outward, strengthening our organization, our families and our communities.

When we show compassion and grace, we do more than comfort; we give hope. A kind word or gesture may provide the encouragement a veteran needs to face unseen battles of the mind—those hidden scars that smiles and waves often conceal. Within DAV, we hold the power to offer that kind of healing, helping each other endure and rise above life's hardest trials.

We're equipped with the strength, resilience and love needed to remain a united front. By our example, we set the tone for camaraderie and fellowship. We stand stronger together than apart, and by doing so, we will continue to lead, inspire and serve as a model for others to follow.

Unity is a powerful force—one that transforms lives and communities. It's how new members feel welcomed, how the Auxiliary grows and how our mission carries forward with strength. When we share kindness and remain united, we become one voice. With that voice, we'll achieve great things while holding fast to our standards of excellence and integrity.

As our great agrarian poet Wendell Berry wrote:

*"The community must take care of its soil,
so that the soil may take care of the community,
so that the children may live."*

So, too, must we care for one another so that together, we may continue to serve, heal and endure, ensuring that future generations may continue this sacred mission. ■

Death of DAV deputy national communications director

■ David E. Autry, a retired DAV leader who served as deputy national director of communications, died Sept. 14. He was 78.

A Vietnam-era veteran, Autry served in the Navy from 1965 to 1969.

A native of Memphis, Tennessee, he began his DAV career on April 4, 1994, as an associate national communications director at National Service and Legislative Headquarters in Washington, D.C. He was promoted to deputy national communications director in



Autry

1998 and held that position until his retirement in 2014.

He was a member of DAV Chapter 4 in Wheaton, Maryland.

“David played an important role in telling DAV’s story and elevating the voices of disabled veterans across the nation,” said National Adjutant Barry Jesinoski. “His commitment to our mission and the veteran community was unwavering. We are deeply saddened by his passing and extend our sympathies to his family.”

Autry was preceded in death by his wife, Alice, in 2021. He is survived by his son, Michael.



Spread the news! Send photos of your DAV or Auxiliary news to production@dav.org.

Photos should be at least 3 x 5 inches at 300 dpi. Please include a description of the event and names of those pictured, when applicable. In most cases, submissions are published in the order in which they are received but are subject to editing for clarity, style, accuracy, space and propriety.

NOW ACCEPTING REAL ESTATE DONATIONS

TO SUPPORT VETERANS



If you have a real estate asset costing you money or not being utilized and you want to put the equity to good use, donating it is a great way to support disabled veterans. You may even claim a significant tax deduction!

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Help the brave men and women who served by donating any car, truck, RV or boat, and you could qualify for a tax deduction.

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DAV Honor Garden

A living monument to our nation's heroes

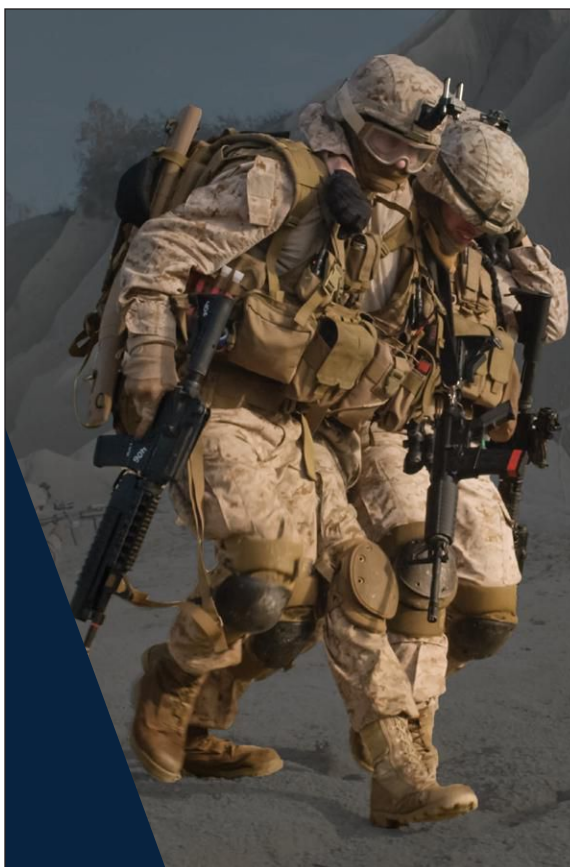
We invite you to honor a veteran and be part of the historic DAV Honor Garden monument with the purchase of a commemorative brick. **Order today.**

Scan or visit dav.org/bricks or call 877-647-VETS (8387).



PHOTOS BY WES BATTOLETTE







Your fellow veterans need you

Pledge your support to your brothers- and sisters-in-arms. Become a part of this elite club for DAV life members and receive a metal membership card. A monthly gift of \$21 or more is all it takes.

For more information:
Toll-free: 833-829-7066
warriorsclub@dav.org
dav.org/warriorsclub





New York veterans perform final salute for forgotten heroes ...

John F. Scalesi Jr. (not pictured), the 1st junior vice commander of the DAV Department of New York, recently participated in a final salute to seven World War II veterans whose remains were discovered in an old funeral home. The new owners found them and alerted various veterans organizations. The remains were stored in urns labeled with their names. More than 300 guests from the community and military and veterans organizations attended the ceremony.



Texas veterans and volunteers team up to support flood victims ...

When severe flooding in San Angelo, Texas, destroyed hundreds of homes and displaced residents, local DAV volunteers and members stepped in to help. DAV Chapter 5 and the DAV national service office in San Antonio made supplies and disaster assistance available. They set up at the San Angelo VA Clinic. Together with the VA West Texas Healthcare System and the Abilene Vet Center, DAV teams provided disaster relief assistance to affected veterans in the community.



Bravo Zulu ...

From left: Commander Crystal L. Schaefer, 78th Commanding Officer of the USS Constitution; Marine Lt. Gen. Eric Austin; Tom Lyons, Marine veteran and Boston civic leader; DAV National Commander Coleman Nee; and retired Marine Maj. Gen. James Lukeman of the Marine Corps Heritage Foundation mark the return of the USS Constitution after a turnaround marking the anniversary of D-Day and kicking off the yearlong celebration to mark the 250th birthday of the Marine Corps.

REUNIONS

ARMY

173RD AIRBORNE BRIGADE ASSOCIATION June 16-22, 2026, Rapid City, ND, Contact: Kimberly Hubbard, Ph: 619-884-9571, Email: kimberly@essential-lodging.com, Web: skysoldier.net/rapidcityreunion

NAVY

USS ALBEMARLE (AV-5) May 2-6, 2026, Corpus Christi, TX, Contact: Steve Nye, Ph: 508-372-9024, Email: sm820@yahoo.com

MARINES

USMC WEATHER SERVICE (METOC) June 14-18, 2026, Binghamton, NY, Contact: Dave Englert, Ph: 812-630-2099, Email: englertd@psci.net, or Kathy Donham, Ph: 252-342-8459, Email: kathy.donham@hotmail.com

INQUIRIES

- Searching for a fellow Marine I served with as "pointman," also known as Sunny from Cincinnati. I was injured in the bush and medevaced to Japan. All of my property from Vietnam was lost. Contact: Dwight Johnson, Email: flamepoint959@outlook.com
- Searching for anyone serving with Dr. Harold A Decker, U.S. Public Health Service, on the USS Hope in Saigon Bay or up the Saigon River (assisting the French surgeons) during the late 1950s or early 1960s. Contact: Bill Decker, Email: billdecker2001@gmail.com

- Searching for a copy of "The Lucifer Patch: Flying With the 'Lucky 13th,' Korea 1955-1956" by Bertram Brent. Or searching for information on how to buy a copy of this book. This book is about the author's time in Uijeongbu, Korea, in 1955-1956. Contact: Arnold Davis, Ph: 865-712-1744, Email: arnoldralphdavis@gmail.com
- Searching for five men who were hit with a hand grenade on April 16, 1970, in Phước Vinh, Vietnam. We were in Company C, 31st Engineer Battalion (Combat). Contact: Timothy Hogan, Email: mehogan333@comcast.net
- Searching for someone who owns a duffel bag with the name M.L. Pringle 16 088 611. Where it came from and how I got it is unknown. My training sites were Fort Jackson, SC, for basic and Fort Gordon, GA, for MP school. My duty stations were Torii Station, Okinawa, and Helemano Station, HI. If the owner is alive, I would like to get the bag to him; if deceased, to his family. Contact: Bill Brogan, Email: designadv62@comcast.net
- Searching for anyone who served with Gary Carr in the 7th Ordnance Company 1965-1966 in Korea. Contact: Gary Carr, Ph: 304-472-6099
- Searching for Mark Cushman, originally from Portland, OR. Served in 4th Battalion, 6th Infantry Regiment, Berlin Brigade, in 1976-1978, assigned to the battalion motor pool. Contact: Daniel Lara, Ph: 509-631-0313, Email: damdan007@gmail.com
- Searching for fellow Army soldiers who served at Fort McClelland in Anniston, AL, 1964-1966 in the 69th Chemical Company. Need information regarding pending VA claim. Contact: Gerard (Jerry) Millen, Ph: 530-570-1293 or 530-934-5566, Email: gmmillen4@gmail.com
- Searching for anyone who was in Platoon 3013, MCRD Parris Island, in July 1967. Contact: Harry Hopwood, Ph: 352-284-6386, Email: harryhopwood02@gmail.com

- Searching for Barry G. Grafe. We did basic training at Fort Sill, OK, in late 1987. He was in the California National Guard. Contact: Andrew Panday, Ph: 504-722-2248, Email: panday_andrew@yahoo.com
- Searching for Capt. Owen Hadley, Owen. First served as enlisted in Battery C, 5th Battalion, 41st Field Artillery Regiment, at Fort Knox, KY, during 1987-1988. He became an officer, went to Germany and married a German woman. Hadley is from Laurel, MS. Contact: Andrew Panday, Ph: 504-722-2248, Email: panday_andrew@yahoo.com

REUNION STORIES

DAV is interested in stories about veterans who connected via the Reunions section of DAV Magazine. If you have a story you would like to share, please email feedback@dav.org.

PLANNING A REUNION?

We welcome submissions from our readers for reunions and inquiries. Email the details to feedback@dav.org. Submissions must be received at least six months before the event date and are subject to editing for clarity, style, accuracy, space and propriety.



NATIONAL DISABLED
VETERANS
WINTER SPORTS CLINIC

April 4-11
SNOWMASS VILLAGE, COLORADO

2026

wintersportsclinic.org #wintersportsclinic

APPLY NOW

Applications are available at wintersportsclinic.org and must be completely filled out and properly signed.

Mail applications to:
VA Western Colorado HCS
Alex Maitre/WSC
2121 North Ave.
Grand Junction, CO 81501

They can also be scanned and submitted to alexandre.maitre@va.gov.

**APPLICATION DEADLINE
IS NOV. 30.**



VA



U.S. Department
of Veterans Affairs

The National Disabled Veterans Winter Sports Clinic is scheduled to return to the mountains of Colorado in 2026, and interested veterans can now submit an application to participate.

The annual event, co-presented by DAV and the Department of Veterans Affairs, will take place April 4–11. The clinic is a leader in adaptive winter sports instruction for disabled veterans, promoting world-class health care at a one-of-a-kind rehabilitative event. Known as “Miracles on a Mountainside,” the clinic offers veterans

opportunities for self-development and challenge through sports therapy and rehabilitative adaptive activities, including Alpine and Nordic skiing, rock climbing, sled hockey, and scuba diving.

Participation is open to U.S. military veterans with qualifying disabilities such as spinal cord injuries, orthopedic amputation, blindness and low vision, and certain neurological conditions. Veterans who currently have inpatient or outpatient status at VA medical facilities will have first priority. ■

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Men's S-3XL
\$129



**Eddie Bauer Men's
and Ladies' Vest**
Black
S-XL **\$56**
2XL-4XL **\$59**



Rockwell 1/4 Zip
Infinity Blue
S-3XL **\$46**



**All-American
Long-Sleeve Tee**
White or Black
S-XL **\$19**
2XL-4XL **\$22**



**Dri Duck
Honor Flag Hat**
Tan/Black
\$25



**Camelbak Thrive
20 oz. Tumbler**
Black
\$49



**Pedova Jr.
Padfolio**
Terra Cotta
\$33



Front



Back

**Rothco Canvas
Briefcase Backpack**
Olive Drab | **\$59**



Place your order at davstore.org

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